UNITED STATES DEPARTMENT OF AGRICULTURE

Farm Service Agency Washington, DC 20250 **Notice PM-2125**

For: State and County Offices

Processing Instructions for Portability and Election of Unreduced Options B and C

Approved by: Acting Deputy Administrator, Management

1 Overview

A Background

Pub. L. 105-311, Federal Employees Life Insurance Improvement Act, enacted October 30, 1998, made numerous changes to the FEGLI program.

Two notices have been issued which outline some of the changes:

- Notice PM-2103 covers election of unreduced Options B and C
- Notice PM-2118 covers portability.

B Purpose

This notice outlines procedures for State and County Offices to follow when employees elect to port Option B or elect unreduced Option B and Option C at retirement.

C Contact

For further information about this notice, contact either of the following:

- Susan Brown on 202-418-9039
- Darla Hensley on 202-418-9021.

Note: TDD on 202-418-9116.

Disposal Date	Distribution
December 1, 1999	State Offices; State Offices relay to County Offices

Notice PM-2125

2 Portability

A

Definition

<u>Portability</u> is the ability to continue (port) coverage that would otherwise terminate.

В

Effective Date

Portability became effective April 24, 1999.

\mathbf{C}

Portable Coverage

Only Option B can be ported. Basic insurance, Option A, and Option C insurance cannot be ported.

A person can port the highest number of multiples of Option B that meet the 5-year/first opportunity requirement.

Note: A person can also choose to port a lesser number of multiples.

D Eligibility

Employees must meet the following 2 requirements to port their Option B coverage:

- FEGLI coverage must be terminating because of separation from service or completion of 12 months in nonpay status
- employee must meet the 5-year/first opportunity requirement.

Note: If the employee has assigned his/her coverage, it is the assignee who has the right to port.

Continued on the next page

E 5-Year/First Opportunity Requirement

The 5-year/first opportunity requirement states that the employee must meet either of the following criteria:

- had coverage for the 5 years immediately preceding the separation or completion of 12 months in nonpay status
- had coverage for the entire time he/she was eligible, if that is less than 5 years.

Note: Compensationers may use the 12 months in nonpay status to meet the 5-year/first opportunity requirement to port Option B coverage.

F AD-1137 Portability Notice

OPM is preparing a new form that will combine the information from SF-2819 and SF-2821. It will include information on portability.

Until the new form is available, use AD-1137, Exhibit 1. This form may be found on BBS under the National Forms Library. The file name is AD1137.pdf.

G Processing Instructions at Time of Separation

Take action according to this table to process AD-1137 at time of separation.

Step	Action
1	Determine if employee/assignee is eligible immediately as described in subparagraph D.
2	If employee/assignee is eligible, complete part A of AD-1137.
3	Provide eligible employee/assignee with completed AD-1137 and instructional memo (Exhibit 2).

Continued on the next page

H
Processing
Instruction After
Receiving
AD-1137 from
Employee
/Assignee

Take action according to this table to process AD-1137 after it is received from employee/assignee.

Step	Action
1	Date stamp AD-1137 the date it is received in office from employee/assignee.
2	Determine if AD-1137 was returned timely (within 36 days of terminating event). There are no extensions!
	• If AD-1137 was received timely, go to step 3.
	• If AD-1137 was not received timely, contact MetLife on 1-800-936-4792. If MetLife:
	 received AD-1137 timely, the employee/assignee is eligible to port
	• did not receive AD-1137 timely, then the office must contact the employee/assignee and inform him/her that he/she is unable to port Option B insurance.
3	Complete SF-2821.
4	Review employee's Official Personnel Folder (OPF) and remove all designations, assignments, and court orders.
5	Mail completed SF-2821 and all designations, court orders, and assignments within 60 days of receiving AD-1137 to:
	Metropolitan Life Insurance Company Voluntary Benefits Group Administrative Services
	P.O. Box 2006 Aurora, IL 60507.

Continued on the next page

H
Processing
Instruction After
Receiving
AD-1137 from
Employee
/Assignee
(Continued)

Step	Action
6	File AD-1137 in the employee's OPF.
7	Ported coverage is effective directly from the coverage carried as an employee. Example: If the employee terminated August 14, 1999, the ported coverage is effective August 15, 1999.
8	MetLife will bill individuals monthly for premiums. If premiums are not paid, coverage is canceled.

Processing
Instructions for
Rehires

Take action according to this table to process AD-1137 for rehires.

Step	Action
1	Review all rehired employee OPF's. If OPF has not been received, offices shall ask the former agency or employee the following questions:
	• "Did the employee port his/her Option B at the time of termination?"
	"How many multiples did he/she port?"
2	Contact MetLife on 1-800-936-4792 and notify them that the individual has returned to active service.
3	Request the following information from MetLife:
	 whether the ported insurance is still current the number of multiples the employee currently has.
4	File all returned designations, assignments, and court orders in OPF.
5	Determine the number of multiples employee is eligible for according to subparagraph J.

Continued on the next page

J
Determining
Option B
Coverage for
Rehires that
Ported

An employee returning to active service will get back the number of multiples of Option B he/she had before the terminating event unless:

- he/she canceled multiples while ported
- coverage was canceled for nonpayment of premiums.

Previously separated employees can elect Option B or increase the number of multiples of Option B if it has been at least 180 days since the cancellation of the insurance.

Employees in nonpay status, who were never separated, cannot elect Option B insurance or increase the number of multiples of Option B, unless 1 of the following occurs:

- employee has a life event
- employee takes a physical exam
- there is an open enrollment period.

K Designations of Beneficiary, Assignments, and Court Orders

The following documents remain valid when the employee returns to active Federal or County service:

- designations
- assignments
- · court orders.

MetLife will return any of these documents sent to them when the insurance was ported. All documents should be filed in the employee's OPF.

3 Election of Unreduced Options B and C

A

Background

Notice PM-2103, paragraph 7 outlined the provision of election of unreduced Options B and C at retirement.

At the time of retirement or becoming insured as a compensationer, employees elect how many of their Option B and C multiples they wish to continue into retirement.

Note: Employees who have assigned their insurance cannot reduce the number of multiples of their Option B coverage.

B Employee Action

At the time of retirement or becoming insured as a compensationer, employees must choose the following:

• the number of multiples of Options B and C

Note: If the employee chooses to continue fewer multiples than he/she is eligible to continue, those multiples that are not continued are considered canceled. There is no 31-day extension of coverage or right to convert.

• whether to have all the multiples reduce or none of them reduce (at age 65).

C Effective Date

This provision became effective April 24, 1999, and applies to employees separating for retirement or compensationers completing 12 months in nonpay status on or after April 24, 1999.

Continued on the next page

3 Election of Unreduced Options B and C (Continued)

D

How to Make the Election

Employees will make the election on SF-2818.

Note: SF-2818 is being modified.

Until the form is modified, offices shall continue to use SF-2818 for the Basic insurance election. Offices shall use AD-1138, Option B and C Election Notice, Exhibit 3, for Options B and C elections.

Both SF-2818 and AD-1138 shall be part of the complete retirement package and forwarded to OPM.

Note: Employees do not need to complete SF-2817 to reduce the number of multiples of Options B and C at retirement. Their choice is indicated on AD-1138.

E Election Changes

An annuitant or compensationer who elects No Reduction can change to Full Reduction at any time unless the insurance has been assigned.

Note: If the individual is over age 65, the amount of insurance in force will be computed as if he/she had elected Full Reduction originally. There will be no refund of premiums.

An annuitant who elects Full Reduction can change to No Reduction at any time up until the 2nd month following his/her 65th birthday.

F Assigned Insurance

If the insurance has been assigned, the retiring employee makes the initial election regarding Option B reductions just as he/she does for Basic.

Once the retiring employee, who has assigned the insurance, has made an Option B election, he/she can change only from Full Reduction to No Reduction.

Only the assignee can change from No Reduction to Full Reduction. The assignee cannot change from Full Reduction to No Reduction.

Continued on the next page

3 Election of Unreduced Options B and C (Continued)

G Elections Available at Age 65

Shortly before an annuitant/compensationer reaches age 65, OPM will send a letter reminding him/her of their election at retirement and advising them of the premiums.

The individual will be able to:

- change the election
- choose to have some multiples reduce or some not reduce.

For any multiples for which the annuitant/compensationer elects Full Reduction, premiums will stop at age 65. Premiums for which No Reduction was elected will continue.

Note: If the insurance has been assigned and the annuitant elected No Reduction for all multiples, he/she cannot change that election. The annuitant will receive a letter regarding Option C and the assignee will receive a letter regarding Option B.

H Those That Are Retired or Insured as Compensationers as of April 24, 1999

OPM will contact those persons that are already retired or insured as compensationers on April 24, 1999, and who have Option B.

Sample AD-1137, Portability Notice

AD-1137	U.S. DE	PARTMENT	OF AGRICULTURE	
(07-02-99)	PO	RTABIL	ITY NOTICE	
			otion B Insurance Cover	age)
EMPLOYEE/ASSIGNI	EE'S INSTRUCTIONS			
	to continue or "port" group life insur			minate if Federal Service was
terminated. This Porta	ability Notice applies to Option B cov	erage only	•	
 If you want to por Portability Notice Company at the formal 	to the Agency's employing office en	Part B of the tered in Ite	his Portability Notice. YOU A m 7 below. Also, send a cop	MUST mail or hand-carry this completed by to the Metropolitan Life Insurance
Voluntary Benefits Administrative Se P.O. Box 2006	rvices			
Aurora, IL 60507				
 If you have receiv 	red the SF-2821 (Agency Certification	on of Insura	nce Status), also send that f	orm to MetLife. If you have not receive
the SF-2821, do i	not delay in sending this Notice.			-
Your employing	office must receive the Portabilit	y Notice w	ithin 36 calendar davs fron	the date of the terminating event
	(50 days, if you live overseas). 7			· ·
	ED BY EMPLOYING AGENCY			
 Employee's/Assignee' John P. Smith 	's Name and Address and ZIP Code	2. Employ	ee's/Assignee's Telephone No.	3A. Employee's/Assignee's Soc. Security N
22221 Rainbow				222-22-2222
Smithsville, M	ID 20689	(301)	555-5222	3B. Employee's/Assignee's Date of Birth 05-05-1940
Number of Multiples of	of Option B Employee/Assignee has as of	5 A	of Coverage in Each Multiple	6. Date of Terminating Event
the date entered in Ite	m 6.	(Annua	Basic Pay Rounded Up to the	6. Date of Ferminating Event
	э	Neares	†Thousand) \$45,000.00	7-01-98
7 Agency's Name and A	Address (Including ZIP Code)	8. Name o	of Agency Official to Contact for	9A. Agency Official's Telephone Number
Farm Service A	·		nal Information	1 ' ' '
1400 Independe	ence Ave. SW	Tane	L. Drane	(202) 555-7999
Washington DC	20250-0558	00110	2. 22.00.0	9B. Agency Official's Facsimile Number
				(202) 555-9997
PART B - COMPLETE	ED BY EMPLOYEE (OR ASSIGNEE)		
10. Have you assigned yo		•	X NO	
Give this Portability	ssigned your insurance, you cannot po Notice to your assignee.	rt your Opti	on B coverage. Only your assi	gnee has the right to port your coverage.
11. I choose to port (conti			ribed above. I understand that i	f I do not make premium payments on
	vill be canceled and cannot be reinstate	ed.		
Signature of Employe	e (or Assignee, if applicable) s/John P. Smith			Date 7/2/99
DART O COST	S/JOHN P. SMICH			172733
PART C - COST	10 11 2			
13. The cost of your pone	ed Option B coverage is the same as what	•		n in the chart below:
		1999 HA	E CHART	
	EMPLOYEE'S AGE		MONTHLY COST PER \$1,000	OF COVERAGE
	Under 35 35 through 39		\$0.065 \$0.087	
	40 through 44		\$0.087	
	45 through 49		\$0.130	
	50 through 54		\$0.325	
	55 through 59		\$0.672	
	60 and over		\$1.517	
	NOTE 5	ac there is a	lso a \$1.75 per month administrat	ive fee.
	NOTE: For ported coverage STIONS CONCERNING YOUR PORTED	-	•	

Sample Employee Notification of Portability

February 1, 2000

To: [Insert Employee Name]

From: [Insert Agency]

Subject: Portability of Option B Insurance

Background

Pub. L. 105-311, Federal Employees Life Insurance Improvement Act, enacted October 30, 1998, made numerous changes to the FEGLI program. One of these changes is a 3-year demonstration project allowing the portability of Option B.

Portability is the ability to continue group life insurance coverage that would otherwise terminate.

Purpose

The purpose of this memo is to inform you of your option to port your Option B coverage in the Federal Employees Group Life Insurance (FEGLI) program and provide instructions on how to do so.

Portable Coverage

Only your Option B insurance **can** be ported. Please refer the attached AD-1137 for the number of multiples of Option B you are eligible to port. You may choose to port a lesser number of multiples.

Ported coverage may be:

- · decreased, not increased
- converted to an individual policy only because of age or the end of the demonstration project

Basic insurance, Option A and Option C coverage cannot be ported.

Cost of Ported Coverage

The cost of ported Option B is the same as the cost of Option B for active employees; however, there is an additional \$1.75 per month administrative fee.

Continued on the next page

Sample Employee Notification of Portability (Continued)

Effective Date of Ported Coverage

The ported coverage continues directly from the coverage carried as an active employee.

Example: Your coverage terminates August 14, 1999. The ported coverage begins August 15, 1999.

Salary Changes of Employees in Nonpay Status

Salary changes have no effect on the amount of ported Option B coverage.

Coverage

Ported coverage does not reduce when you reach age 65.

Ported coverage reduces by 50 percent at the beginning of the 2 nd calendar month after you reache **age 70**. If you are already 70 at the time you port Option B coverage, the 50 percent reduction will take place the 2 nd month after the effective date of the ported coverage. The premium is also reduced at this time. You will pay premiums only on the amount of coverage that is still in effect.

Ported coverage stops at the beginning of the 2 nd calendar month after you reaches **age 80**. You will then have the 31-day extension of coverage and right to convert to an individual policy.

Designations/Court Orders/Assignments

Designations of beneficiaries, assignments and court order remain in effect on ported coverage.

Premiums

You will receive a confirmation letter from MetLife once the AD-1137 is received.

MetLife will generate monthly bills for premiums and send them to you. You will have 31 days to pay the bills (45 days if overseas).

Note: For **overseas employees**, the time for paying premiums is extended to **45 days**.

If premiums are not paid, coverage is canceled.

Continued on the next page

Sample Employee Notification of Portability (Continued)

End of Demonstration Project

The 3-year demonstration project comes to an end in April 2002. At that time, if the project is not renewed or made permanent, MetLife will notify you that your coverage is terminating. You will have a 31-day extension of coverage and the opportunity to convert to an individual policy.

How to Port Your Coverage

If you wish to port your Option B insurance:

- complete part B of the attached AD-1137
- return the completed AD-1137 within **31 days** of the the date listed in Part A, #6 to the address listed in Part A, #7

Note: For **overseas employees**, the time for returning completed Exhibit 1 is within **45** days of the terminating event.

• also send a copy within 31 days of the the date listed in Part A, #6 to MetLife at the address in the top section of the AD-1137.

There is no extension period for you to make a portability election.

Additional Information

Refer to the attached AD-1137, Part A, #8 for additional information.

You may also contact MetLife at 1-800-936-4792.

AD-1138, Option B and C Election Notice

AD-1138 (07-23-99)		IENT OF AGRICULTURE Service Agency	
(07-23-99)	rann	Service Agency	
		ION NOTICE FOR RETIRE	VIENT
PART A - TO BE COMPLE 1. Employee's Name and Addre	STED BY EMPLOYING AGENCY	ployee's Telephone Number	Employee's Social Security Number
Employee e Hame and Haule	2. 2	project of telephone Hamilton	2pio,oco ocolai ocolaii, rtaino
	()	
 Number of Multiples of Option Continue 	B the Employee Is Eligible to 5. Nu	mber of Multiples of Option C the Employe Eligible to Continue.	e 6. Employee's Date of Birth
PART B - TO BE COMPLE	TED BY EMPLOYEE AND RETU	JRNED TO EMPLOYING AGENC	Υ
7. OPTION B ELECTION:			
		(This number cannot be more than the nue as the number shown in Item No. 4 above	
		Option B coverage will begin to reduce the	
month after I retire, if I am premiums for this coverag	already over 65.) The reduction will be 2 e after I turn 65. I understand that if I cho	% each month for 50 months, at which tim lose Full Reduction, I can change to No Re	e the coverage will stop. I will not pay any eduction at any time until I reach age 65.
	rstand that if I elect No Reduction, my Opl nd that if I choose No Reduction, I can ch	ion B coverage will not reduce when I read	
over age 65 when I chang no refund of my premium:	ge my election, the amount of Option B rei	maining will be computed as if I had electe	
	ge my election, the amount of Option B rei		
no refund of my premium	ge my election, the amount of Option B rei		
no refund of my premium:	ge my election, the amount of Option B rei s.	naining will be computed as if I had electe	d Full Reduction initially, and there will be
no refund of my premiums 8. CHECK ONLY ONE:	ge my election, the amount of Option B rei		d Full Reduction initially, and there will be
no refund of my premium	ge my election, the amount of Option B rei s.	naining will be computed as if I had electe	d Full Reduction initially, and there will be
no refund of my premiums 8. CHECK ONLY ONE: w	pe my election, the amount of Option B rei s. ant Full Reduction	naining will be computed as if I had electe	d Full Reduction initially, and there will be
no refund of my premiums 8. CHECK ONLY ONE: I w 9. Signature of Employee 10. OPTION C ELECTION:	pe my election, the amount of Option B rei	naining will be computed as if I had electe	n
no refund of my premium: 8. CHECK ONLY ONE: w 9. Signature of Employee 10. OPTION C ELECTION:	pe my election, the amount of Option B ress. ant Full Reduction	naining will be computed as if I had electe	d Full Reduction initially, and there will be DATE
no refund of my premium: 8. CHECK ONLY ONE: I w 9. Signature of Employee 10. OPTION C ELECTION: 11. A. Number of Multiples of C If you have assigned your B. FULL REDUCTION: I und month after I retire; if I am	pe my election, the amount of Option B ress. ant Full Reduction prion B I Want to Continue: insurance, this number must be the same ferstand that if I elect Full Reduction, my 0 already over 65.) The reduction will be 2	I want No Reduction	In
9. Signature of Employee 10. OPTION C ELECTION: 11. A. Number of Multiples of C If you have assigned your B. FULL REDUCTION: I under this coverage. I understar	pe my election, the amount of Option B ress. ant Full Reduction option B I Want to Continue: insurance, this number must be the same lenstand that if I elect Full Reduction, my Q already over 65.) The reduction will be 2 e after I turn 65. I understand that if I cho stand that if I elect No Reduction, my Opti d that if I choose No Reduction, I can che e my election, the amount of Option C re	I want No Reduction This number cannot be more than the nurse as the number shown in Item No. 5 above.	In
no refund of my premiums 8. CHECK ONLY ONE: I w 9. Signature of Employee 10. OPTION C ELECTION: 11. A. Number of Multiples of C If you have assigned your B. FULL REDUCTION: I under month after I retire, if I am premiums for this coverage C. NO REDUCTION: I under this coverage. I understal over age 65 when I chang no refund of my premiums	pe my election, the amount of Option B ress. ant Full Reduction option B I Want to Continue: insurance, this number must be the same lenstand that if I elect Full Reduction, my Q already over 65.) The reduction will be 2 e after I turn 65. I understand that if I cho stand that if I elect No Reduction, my Opti d that if I choose No Reduction, I can che e my election, the amount of Option C re	I want No Reduction (This number cannot be more than the nurse as the number shown in Item No. 5 abow.) Option C coverage will begin to reduce the seach month for 50 months, at which time one Full Reduction, I can change to No Reson C coverage will not reduce when I reach ange to Full Reduction at any time (unless ange to Full Reduction at any time (unless	In
9. Signature of Employee 10. OPTION C ELECTION: 11. A. Number of Multiples of C If you have assigned your B. FULL REDUCTION: I under this coverage. I understan over age 65 when I chang no refund of my premiums 12. CHECK ONLY ONE:	pe my election, the amount of Option B ress. ant Full Reduction option B I Want to Continue: insurance, this number must be the same lenstand that if I elect Full Reduction, my Q already over 65.) The reduction will be 2 e after I turn 65. I understand that if I cho stand that if I elect No Reduction, my Opti d that if I choose No Reduction, I can che e my election, the amount of Option C re	I want No Reduction (This number cannot be more than the nurse as the number shown in Item No. 5 abow.) Option C coverage will begin to reduce the seach month for 50 months, at which time one Full Reduction, I can change to No Reson C coverage will not reduce when I reach ange to Full Reduction at any time (unless ange to Full Reduction at any time (unless	n
9. Signature of Employee 10. OPTION C ELECTION: 11. A. Number of Multiples of C 15 you have assigned your 16. NO REDUCTION: I under this coverage. I understan over age 65 when I chang no refund of my premiums 12. CHECK ONLY ONE:	pe my election, the amount of Option B res. ant Full Reduction option B I Want to Continue: insurance, this number must be the same terstand that if I elect Full Reduction, my Q already over 65.) The reduction will be 2 e after I turn 65. I understand that if I cho stand that if I elect No Reduction, my Opti nd that if I choose No Reduction, I can che e my election, the amount of Option C res.	I want No Reduction (This number cannot be more than the nure as the number shown in Item No. 5 above) Option C coverage will begin to reduce the % each month for 50 months, at which tim ose Full Reduction, I can change to No Reson C coverage will not reduce when I reach ange to Full Reduction at any time (unless maining will be computed as if I had elected	n